

10-14-04

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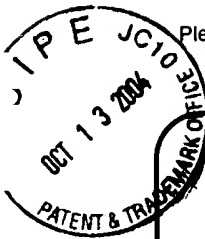
PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**TRANSMITTAL
FORM**

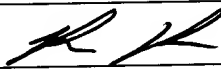
(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/648877	
	Filing Date	August 28, 2000	
	First Named Inventor	Christopher K. Williams, et al	
	Group Art Unit	3628	
	Examiner Name	Frantzy Poinvil	
Total Number of Pages in This Submission		Attorney Docket Number	005169.00001

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Withdrawal as Attorney or Agent Certificate of Express Mail Return Receipt Postcard
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Charles L. Miller Banner & Witcoff, Ltd.
Signature	 Reg. No. 42,065
Date	10/13/04

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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
and CHANGE OF
CORRESPONDENCE ADDRESS**

Application Number	09/648,877
Filing Date	August 28, 2000
First Named Inventor	Christopher K. Williams, et al
Art Unit	3628
Examiner Name	Frantzy Poinvil
Attorney Docket Number	005169.00001

**To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified application, and


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- ☒ the attorneys/agents (with registrations numbers) listed on the attached paper(s), or
- ☐ the attorneys/agents associated with Customer Number

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are: The applicant has failed to pay one or more bills rendered by the practitioners for an unreasonable period of time.

1. ☐ The correspondence address is NOT affected by this withdrawal.
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Telephone		Fax			
Name	Charles L. Miller				
Signature	 Reg. No. 42,065		Registration No.	43,805	
Date	10/13/04		Telephone No.	312-463-5000	

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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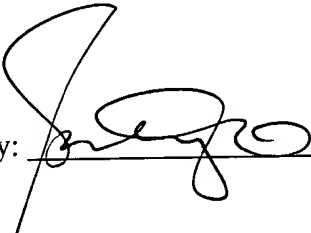
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CERTIFICATE OF MAILING
(PATENT APPLICATION)

Express Mail No. EV363912320US
Deposited: October 13, 2004

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By: _____

Application of: Christopher K. Williams, et al

Application No.: 09/648,877

Filing Date: August 28, 2000

Title: THIRD PARTY BILLING SYSTEM AND METHOD

Transmitted herewith are the following documents:

☒ Transmittal form and duplicate

☒ Request for Withdrawal as Attorney or Agent

☒ Return Receipt Postcard

Attorney Case No.: 005169.00001